

CLAIMS ONLY						Application Number		Filing Date			
						1067389a					
						Applicant(s)					
* May be used for additional claims or amendments											
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
		Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend		
1								51			
2								52	1		
3								53			
4								54			
5								55			
6								56			
7		1						57			
8		1						58			
9								59			
10								60			
11								61			
12								62			
13								63			
14								64			
15								65			
16								66			
17								67			
18								68			
19								69			
20								70			
21								71			
22		1						72			
23	1							73			
24								74			
25								75			
26								76			
27								77			
28								78			
29								79			
30								80			
31								81			
32		1						82			
33		1						83			
34	1							84			
35								85			
36								86			
37		1						87			
38	1							88			
39								89			
40								90			
41								91			
42								92			
43								93			
44								94			
45								95			
46								96			
47								97			
48								98			
49								99			
50	1							100			
Total Indep								Total Indep	10		
Total Depend								Total Depend	47		
Total Claims								Total Claims	57		

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